

ALLIED EYE PHYSICIANS & SURGEONS, INC.
NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

The Health Insurance Portability & Accountability Act of 1996 ("HIPAA") is a Federal program that requests that all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, on paper, or orally are kept properly confidential. This Act gives you, the patient, the right to understand and control how your protected health information ("PHI") is used. HIPAA provides penalties for covered entities that misuse PHI.

As required by HIPAA, we prepared this explanation of how we are to maintain the privacy of your health information and how we may disclose your personal information.

We may use and disclose your medical records only for each of the following purposes: treatment, payment, and health care operations.

- Treatment means providing, coordinating, or managing health care and related services by one or more healthcare providers. An example of this would include referring you to a sub-specialist.
- Payment means such activities as obtaining reimbursement for services, confirming coverage, billing or collections activities, and utilization review. An example of this would include sending your insurance company a bill for your visit and/or verifying coverage prior to a surgery.
- Health Care Operations include business aspects of running our practice, such as conducting quality assessments and improving activities, auditing functions, cost management analysis, and customer service. An example of this would be patient survey cards.

We may also disclose your PHI for law enforcement and other legitimate reasons.

Here are a few examples: federal, state, or local law; public health and health oversight activities; research purposes; workers' compensation programs; lawsuits and disputes; organ and tissue donations; coroner, medical examiner, and funeral director requests; inmates; prevention of a serious threat to health or safety; and emergency situations. We shall do our best to assure its continued confidentiality to the extent possible.

We may use or disclose your PHI to outside companies that assist us in operating our health system. These business associates contract with us to keep any PHI received from us or created on our behalf confidential in the same way we do.

We may create and distribute de-identified health information by removing all reference to individually identifiable information, such as for research.

We may contact you by phone, by secure email, or in writing, to provide appointment reminders, information about treatment alternatives, or other health-related benefits and services that may be of interest to you. You will never receive fundraising communications from us.

The following use and disclosures of PHI will only be made pursuant to us receiving a written authorization from you:

- Uses and disclosures of your PHI for marketing purposes, including subsidized treatment and health care operations;
- Disclosures that constitute a sale of PHI under HIPAA; and
- Other uses and disclosures not described in this notice. We do not practice psychotherapy or create psychotherapy notes.

You may revoke such authorization in writing and we are required to honor and abide by that written request, except to the extent that we have already taken actions relying on your authorization.

You may have the following rights with respect to your PHI:

- The right to request restrictions on certain uses and disclosures of PHI, including those related to disclosures to family members, other relatives, close personal friends, or any other person identified by you. We are, however, not required to honor a requested restriction except in limited circumstances, which we shall explain if you ask. If we do agree to the restriction, we must abide by it unless you agree in writing to remove it.
- The right to reasonable requests to receive confidential communications of PHI by alternative means or at alternative locations.
- The right to inspect and copy your PHI via paper or our secure portal.
- The right to amend your PHI.

- The right to receive an accounting of disclosures of your PHI.
- The right to obtain a paper copy of this notice from us upon request.
- The right to be advised if your unsecured PHI is intentionally or unintentionally disclosed by us or one of our business associates.

If you have paid for services “out of pocket”, in full, and you request that we not disclose PHI related solely to those services to a health plan, we will accommodate your request, except where we are required by law to make a disclosure.

Ohio Law requires that we obtain an authorization from you in many instances before disclosing: the performance or results of an HIV test, diagnosis of AIDS, or an AIDS-related condition; information about drug or alcohol treatment you have received in a drug or alcohol treatment program; information about mental health services you may have received; and certain information to the State Long-Term Care Ombudsman.

In the event that the practice is sold or merged with another organization, your PHI/ medical record will become the property of the new owner.

We are required by law to maintain the privacy of your PHI and to provide you with notice of our legal duties and our privacy practices with respect to PHI.

This notice is effective as of 8/15/2013 and it is our intention to abide by the terms of the Notice of Privacy Practices and HIPAA regulations currently in effect. We reserve the right to change the terms of our Notice of Privacy Practices and to make the new notice provision effective for all PHI that we maintain. We will post and you may request a written copy of the revised Notice of Privacy Practices from our office.

You have recourse if you feel that our office has violated your protections. You have the right to file a formal, written complaint with our office and with the Department of Health and Human Services, Office of Civil Rights. We will not retaliate against you for filing a complaint. Feel free to contact our Practice Compliance Officer for more information, in person or in writing.